	FTO/SB/06 (03-03)
	Approved for use guough 7/31/2008, CAIB 0851-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								09/68999/				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY ,	OR	OTHER THAN OR SMALL ENTITY		
FOR MUNISER FILED MUNISER EXTR						RATE	FEE		RATE	FEE		
DASIC FEE				1	MILE	,	OR					
(57 CFR 1.16(xi)) TOTAL CLAMS										-		
G7 CFR 1.19(q) minus 20 = "						× *		OR	ו			
(87 GFR 1.16(N)) robus 3 = *						× •		OR	× 8			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(s))							**		OR	+1=		
° If the difference in column 1 is less than zero, arter "O" in column 2.							TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
4	4105 (Column 1) (Column 2) (Column 5)					_	SMALL E	ENTITY_	OR		THAN ENTITY	
ENDMENT	-	CLAIMS REMAINING AFTER AMENDMENT	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ž	Total gr cra Lugg	· 20	Minus **	24			xs		OR	X 8 -	7	
	Independent (07 GFR 1.1669)	- 1	Micurs **	6	-		x 8 =		OR	X 5=	1	
₹	FRET PRESENTATION OF MALTIPLE DEPENDENT CLAIM (ST CFR 1,1820)						+1=		OR	+: =	7	
dolor					,	TOTAL ADD'L FEE		OR	TOTAL ADDIL FEE			
5 /9/05						AUCTEE		. •••	ADDETEE			
	_	(Column 1) CLAMS	Π-Τ	(Column 2) HIGHEST	(Cotumn 3)	1			1		Г.	
MENT		REMARKING AFTER AMENDMENT		NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		MIE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
3	Total prom Linea	20	Minus **	24	*		x 8•		OR	x e=		
END	Endependent (07 CPR 1.1668)	• 4	Minus **	6	~		x 9=		OR	ż		
FIRST PRESENTATION OF MILETIPLE DEPENDENT CLAM (37 CFR L18(4))							+5=		OR	; 		
							TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	5	
(Column 1) (Column 2) (Column 3)												
DMENT &	6	CLAIMS REMAINING AFTER AMENDMENT		NUMBER NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	,	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL FEE	
Ž	Or OPR Langue	. 21	Minus **	24)		×4		OR	X 8=		
KEN	independent (17 GPM 1.1000)	4	Minus **	6	٠		x 8 =		OR	x s=		
¥٧	FRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1800)						+1		OR	į		
·						•	ADO'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "V" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												
"If the "Highest Number Previously Paid For" II This SPACE is less than 3, enter "2". "If the "Highest Number Previously Paid For" II This SPACE is less than 3, enter "2". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by S7 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to tatte 12 minutes to complete, including gathering, propering, and submitting the completed application form to the USPTO. Time will vary depending upon the included case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this bunders, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEMD FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patentia, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need eschizance in completing the form, csil 1-800-PTO-0190 and salect option 2.